



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1845

SERIAL NUMBER 09/115,832	FILING DATE 07/15/1998 RULE	CLASS 435	GROUP ART UNIT 1647	ATTORNEY DOCKET NO. PF399		
APPLICANTS REINHARD EBNER, GAITHERSBURG, MD; MARIANNE MURPHY, RICHMOND, UNITED KINGDOM; STEVEN M. RUBEN, OLNEY, MD; JING-SHAN HU, SUNNYVALE, CA; D. ROXANNE DUAN, BETHESDA, MD; KIMBERLY A. FLORENCE, ROCKVILLE, MD; CRAIG A. ROSEN, LAYTONSVILLE, MD;						
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/052,870 07/16/1997 AND CLAIMS BENEFIT OF 60/060,140 09/26/1997 AND CLAIMS BENEFIT OF 60/055,952 08/18/1997						
** FOREIGN APPLICATIONS *****						
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/21/1998						
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged		<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MD	SHEETS DRAWING 3	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 7
ADDRESS 22195						
TITLE #157B INTERLEUKIN-20						
FILING FEE RECEIVED 1436	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:					
		<input type="checkbox"/> All Fees				
		<input type="checkbox"/> 1.16 Fees (Filing)				
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)				
		<input type="checkbox"/> 1.18 Fees (Issue)				
		<input type="checkbox"/> Other _____				
		<input type="checkbox"/> Credit				

SERIAL NUMBER 09/115,832	FILING DATE 07/15/98	CLASS 536	GROUP ART UNIT 1646	ATTORNEY DOCKET NO. PF399
-----------------------------	-------------------------	--------------	------------------------	------------------------------

APPLICANT REINHARD EBNER, GAITHERSBURG, MD; MARIANNE MURPHY, RICHMOND, UNITED KINGDOM; JING-SHAN HU, SUNNYVALE, CA; D. ROXANNE DUAN, BETHESDA, MD; KIMBERLY A. FLORENCE, ROCKVILLE, MD; CRAIG A. ROSEN, LAYTONSVILLE, MD.

****CONTINUING DOMESTIC DATA*******

VERIFIED PROVISIONAL APPLICATION NO. 60/052,870 07/16/97

PROVISIONAL APPLICATION NO. 60/060,140 09/26/97

****371 (NAT'L STAGE) DATA*******

VERIFIED

****FOREIGN APPLICATIONS*******

VERIFIED

FOREIGN FILING LICENSE GRANTED 08/21/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Verified and Acknowledged <u>Examiner's Initials</u> <u>Initials</u>	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MD	SHEETS DRAWING 3	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 7
---	---	------------------------	---------------------	--------------------	-------------------------

HUMAN GENOME SCIENCES INC
9410 KEY WEST AVENUE
ROCKVILLE MD 20850

Polynucleotides encoding
INTERLEUKIN-20

FILING FEE RECEIVED \$1,292	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
--------------------------------	---	---